

FROM TREXLER ETAL.

(TUE) 12. 20' 05 14:01/ST. 13:55/NO. 4860347587 P 1

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JAMES A. O'MALLIN  
TIMOTHY M. MCCARTHY  
PAIGE A. KITZINGER

FOUNDED 1890

PATENT, TRADEMARK, COPYRIGHT  
AND RELATED MATTERS: A.L. PHASES  
INCLUDING LICENSING AND LITIGATION

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DEC 20 2005

**FACSIMILE TRANSMISSION**

LEWIS T. STEADMAN, SR.

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TOTAL PAGES (Including Cover Page) 7 DATE: December 20, 2005

Commissioner of Patents and Trademarks

TO: Examiner T. Mitchell FROM: Raiford A. Blackstone, Reg. No. 25 156

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**NOTES:**

Inventor: Smith et al.

For: AN EXPIRATORY LIMB FOR A  
BREATHING CIRCUIT

Serial No.: 10/622,755

Filed: July 18, 2003

Art Unit: 3743

Atty Docket No.: 1171/39359A/95A-DIV

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office to fax number (571) 273-8300 on December 20, 2005.

Jiffany E. Sexton  
Jiffany E. Sexton

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FROM TREXLER ETAL.

(TUE) 12. 20' 05 14:01/ST. 13:55/NO. 4860347587 P 2

FORM PTO-1085

Case Docket No. 1171/19359A/95A-DIV

In re application of: **Smith et al.**  
 Serial No.: **10/622,755**  
 Filed: **July 18, 2003**  
 For: **AN EXPIRATORY LIMB FOR A BREATHING CIRCUIT**

CERTIFICATION OF FACSIMILE TRANSMISSION	
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Date	<u>December 20, 2005</u>
Signature	<u>Tiffany E. Sexton</u>
Tiffany E. Sexton	

COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an "AMENDMENT" for the above-identified application.

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The filing fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid for	Present Extra
TOTAL	* 90	MINUS	** 90	0
INDEP.	* 4	MINUS	** 4	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY	
Rate	Addit. Fee
x 25 =	\$ .00
x 100 =	\$ .00
+ 180 =	\$ .00
TOTAL ADDIT. FEE	\$ .00

OTHER THAN A SMALL ENTITY	
Rate	Addit. Fee
x 50 =	\$ .00
x 200 =	\$ .00
+ 360 =	\$ .00
TOTAL	\$ .00

OR

OR

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge my Deposit Account No. 20-1495 in the amount of \$ 790.00 for the RCE fee. A duplicate copy of this sheet is enclosed.
- ☒ Request for Continued Examination (RCE).
- ☒ Please charge my Deposit Account No. 20-1495 in the amount of \$ 450.00 for the Extension Request. A duplicate copy of this sheet is enclosed.
- ☒ A Request for a Two-Month Extension of Time.
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is also enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1495. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees required under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: Dec. 20, 2005

Raiford A. Blackstone, Jr.  
 Raiford A. Blackstone, Jr. Reg. No. 25,156  
Linda L. Palomar  
 Linda L. Palomar Reg. No. 37,903  
 Attorneys of Record

FROM TREXLER ETAL.

(TUE) 12. 20' 05 14:01/ST. 13:55/NO. 4860347587 P 3

FORM PTO-1083

Case Docket No. 1171/39359A/95A-DIV

In re application of: Smith et al.  
 Serial No.: 10/622,755  
 Filed: July 18, 2003  
 For: AN EXPIRATORY LIMB FOR A BREATHING CIRCUIT

CERTIFICATION OF FACSIMILE TRANSMISSION	
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<u>December 20, 2005</u>	Date
<u>Tiffany E. Sexon</u>	Signature
Tiffany E. Sexon	

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	Claims Remaining After Amendment		Highest No. Previously Paid for	Present Extra
TOTAL	* 90	MINUS	** 90	0
INDEP.	* 4	MINUS	** 4	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

## SMALL ENTITY

Rate	Addit. Fee
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x 100 =	\$ .00
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TOTAL ADDIT. FEE	\$ .00

## OTHER THAN A SMALL ENTITY

Rate	Addit. Fee
x 50 =	\$ .00
x 200 =	\$ .00
+ 300 =	\$ .00
TOTAL	\$ .00

OR

OR

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Dated: Dec. 20, 2005

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